Caution: DRAFT FORM

This is an advance proof copy of an IRS tax form. It is subject to change and OMB approval before it is officially released. You can check the scheduled release date on our web site (www.irs.gov).

If you have any comments on this draft form, you can submit them to us on our web site. Include the word DRAFT in your response. You may make comments anonymously, or you may include your name and e-mail address or phone number. We will be unable to respond to all comments due to the high volume we receive. However, we will carefully consider each suggestion. So that we can properly consider your comments, please send them to us within 30 days from the date the draft was posted.

4	000		Annual Summary and Transmittal of										o. 1545-0108	
Department	096 of the Treasurenue Service	ry	Annual Summary and Transmittal of U.S. Information Returns									20	09	
•	ER'S name	(including ro	om or suite	number)		of		٦						
City, state, and ZIP code														
Name of person to contact Telephone number											Use O	nly		
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1 Employer identification number 2 Social security number 3 Total number of forms 4 Federal income tax withheld \$ 5 Total amount reported \$										orted with this	Form 1096			
6 Enter a	n "X" in only	one box be	low to indic	ate the type	of form bei	ng filed.	7	If this is you	ır final retu	rn, enter an	"X" here .	•		
W-2G 32	1098 81	1098-C 78	1098-E 84	1098-T 83	1099-A 80	1099-B 79	1099-C 85	1099-CAP 73	1099-DIV 91	1099-G 86	1099-H 71	1099-INT 92	1099-LTC 93	
1099-MISC 95	1099-OID 96	1099-PATR 97	1099-Q 31	1099-R 98	1099-S 75	1099-SA 94	3921 25	3922 26	5498 28	5498-ESA 72	5498-SA 27			
Return	Return this entire page to the Internal Revenue Service. Photocopies are not acceptable.													
	alties of perjudication	ury, I declare	that I have	examined the	nis return ar	nd accompar	nying docu	ments, and,	to the best	of my knowl	edge and be	elief, they ar	e true,	
Signature	· •					Title ▶					Date	•		

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